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21658 7590 04/26/2004

DYKAS, SHAVER & NIPPER, LLP
 P.O. BOX 877
 802 WEST BANNOCK STREET, SUITE 405
 BOISE, ID 83701

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Amber R. Smith (Depositor's name)
 Amber R. Smith (Signature)
 July 12, 2004 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/010,177	11/13/2001	Melvin A. Zehr	DIAZ114	7766

TITLE OF INVENTION: BEARING SHEAR BLOCK

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	07/26/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
ROSENBAUM, MARK	3725	241-021000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Robert L. Shaver
 2 Dykas, Shaver & Nipper
 3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Diamond Z Manufacturing

Caldwell, Idaho

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

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- ☒ Issue Fee
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(Authorized Signature) Robert L. Shaver (Date) 07/12/2004
 Reg. No. 42,145

07/16/2004 DENMANU2 00000043 10010177

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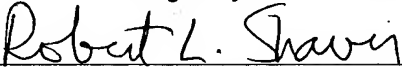
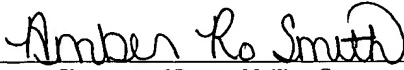
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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01 FC:2501
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665.00 OP
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TRANSMIT THIS FORM WITH FEE(S)

TRANSMITTAL OF PAYMENT OF ISSUE FEE (Small Entity) (37 C.F.R. 1.311)					Docket No. DIAZ114	
Applicant(s): MELVIN ZEHR						
Application No. 10/010,177		Filing Date 11/13/2001		Examiner ROSENBAUM	Customer No. 21,658	Group Art Unit 3725
					Confirmation No. 7766	
Invention: BEARING SHEAR BLOCK						
Mail Stop Issue Fee COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450						
Transmitted herewith are the following for the above-identified application.						
<input checked="" type="checkbox"/> Issue Fee Transmittal Form PTOL-85						
<input checked="" type="checkbox"/> Utility Fee: <u>\$ 665.00</u> <input type="checkbox"/> Design Fee: _____ <input type="checkbox"/> Plant Fee: _____						
<input checked="" type="checkbox"/> Publication Fee: <u>\$ 300.00</u>						
<input checked="" type="checkbox"/> A check in the amount of <u>\$965.00</u> is attached.						
<input type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. _____ as described below.						
<input type="checkbox"/> Charge the amount of _____						
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ROBERT L. SHAVER DYKAS, SHAVER & NIPPER, LLP PO BOX 877 BOISE, ID 83701-0877 208-345-1122 REG. NO. 42,145						
cc: CLIENT						
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